Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF WASHINGTON	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	,	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	James First name  A. Middle name  McCarter  Last name and Suffix (Sr., Jr., II, III)	Ī	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Jim McCarter		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4461		

Debtor 1 James A. McCarter Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	□ I have not used any business name or EINs.  DBA James A. McCarter DDS, P.S.  Business name(s)  EIN	☐ I have not used any business name or EINs.  Business name(s)  EIN
5.	Where you live	6119 W. Excell Avenue	If Debtor 2 lives at a different address:
		Spokane, WA 99208  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Spokane	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Por	Tall the Court About )	/our Ponl	cruptov Co					
7.	The chapter of the Bankruptcy Code you are	Your Bankruptcy Case  Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	Chapter 7						
		☐ Chap						
		☐ Chap						
		☐ Chap						
8.	How you will pay the fee	ab ord	out how yo	ou may pay. Typically attorney is submittir	y, if you are paying the fee yo	k with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or mone alf, your attorney may pay with a credit card or check with		
						on, sign and attach the Application for Individuals to Pay		
			J	ee in Installments (Ot	,	n only if you are filing for Chapter 7. By law, a judge may,		
		bu ap	t is not req plies to yo	uired to, waive your ur family size and yo	fee, and may do so only if you are unable to pay the fee in	our income is less than 150% of the official poverty line the ninstallments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to	ine 12.				
		☐ Yes.	Has yo	our landlord obtained	d an eviction judgment agains	st you?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial</i> Sthis bankruptcy pet		Judgment Against You (Form 101A) and file it as part of		

Deb	tor 1 James A. McCarte	er			Case number (if known)
art	3: Report About Any Bu	sinesses	You Own	as a Sole Proprieto	or
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of busi	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation,		Name	e of business, if any	
	partnership, or LLC.  If you have more than one sole proprietorship, use a		Numb	er, Street, City, State	e & ZIP Code
	separate sheet and attach it to this petition.		Chec	k the appropriate box	x to describe your business:
	it to time pointern				ess (as defined in 11 U.S.C. § 101(27A))
					Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
					r (as defined in 11 U.S.C. § 101(6))
				None of the above	· · · · · · · · · · · · · · · · · · ·
3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you ir ns, cash-fl	ndicate that you are a ow statement, and fe	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am r	not filing under Chapt	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and dunder Subchapter V of Chapter 11.
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and Subchapter V of Chapter 11.
art	4: Report if You Own or	Have Any	Hazardo	ous Property or Any	/ Property That Needs Immediate Attention
4.	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■ No.	What is	the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
	- ·				Number, Street, City, State & Zip Code

Debtor 1 James A. McCarter

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101 22-00599-FPC7

Deb	otor 1 James A. McCarte	er			Case number	(if known)
⊃ar	t 6: Answer These Questi	ons for Re	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily individual primarily for a pe			ed in 11 U.S.C. § 101(8) as "incurred by an
			■ No. Go to line 16b.			
			☐ Yes. Go to line 17.			
		16b.	Are your debts primarily money for a business or inv			
			☐ No. Go to line 16c.			
			Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not cons	umer debts or business	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.		
after prop	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	are paid that funds will be a			erty is excluded and administrative expenses
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		■ No □ Yes			
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99	99	☐ 1,000-5,00 ☐ 5001-10,0 ☐ 10,001-25	00	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to be worth?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$10,000,00 □ \$50,000,00	1 - \$10 million 01 - \$50 million 01 - \$100 million 001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you estimate your liabilities to be?	\$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$10,000,00 □ \$50,000,00	1 - \$10 million 01 - \$50 million 01 - \$100 million 001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
ar	t7: Sign Below					
or	you	I have ex	amined this petition, and I d	eclare under penalty o	f perjury that the inform	ation provided is true and correct.
						under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.
			rney represents me and I did t, I have obtained and read			an attorney to help me fill out this
		I request	relief in accordance with the	e chapter of title 11, Un	ited States Code, spec	ified in this petition.
		bankrupto and 3571	cy case can result in fines up			property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
		James A	es A. McCarter A. McCarter e of Debtor 1		Signature of Debtor	2
		Executed	on 6/17/2022 MM / DD / YYYY		Executed on MM	/ DD / YYYY

Debtor 1	James A. McCarter	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Kevin O'Rourke	Date	6/17/2022
Signature of Attorney for Debtor	_	MM / DD / YYYY
Kevin O'Rourke Printed name		
Southwell & O'Rourke		
Firm name		
421 W. Riverside Avenue		
Suite 960		
Spokane, WA 99201		
Number, Street, City, State & ZIP Code		
Contact phone <b>509-624-0159</b>	Email address	kevin@southwellorourke.com
28912 WA		
Bar number & State		

<b>3</b> 111	in this inforn	nation to identify your	case:			
	otor 1	James A. McCart				
Den	ntor r	First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	EASTERN DISTRICT O	F WASHINGTON		
Cas (if kn	e number own)				☐ Checl	k if this is an
					amen	ded filing
		<u>rm 106Sum</u>				
				d Certain Statistical Information are filing together, both are equally responsible f		12/15
nfor	mation. Fill o	out all of your schedul	es first; then complete th	e information on this form. If you are filing amend the box at the top of this page.		
Part	1: Summ	arize Your Assets				
					Your a	ssets of what you own
1.		/B: Property (Official F			•	450.072.00
	1a. Copy line	e 55, Total real estate, t	rom Schedule A/B		\$	459,073.00
	1b. Copy line	e 62, Total personal pro	perty, from Schedule A/B		\$	162,654.46
	1c. Copy line	e 63, Total of all proper	y on Schedule A/B		\$	621,727.46
Part	2: Summ	arize Your Liabilities				
						abilities It you owe
2.			Claims Secured by Property	(Official Form 106D) he bottom of the last page of Part 1 of Schedule D	\$	212,805.80
3.	.,	•	Unsecured Claims (Official	, 3		
J.	3a. Copy th	e total claims from Part	1 (priority unsecured claim	s) from line 6e of <i>Schedule E/F</i>	\$	159.00
	3b. Copy th	e total claims from Part	2 (nonpriority unsecured cl	aims) from line 6j of Schedule E/F	\$	134,259.18
				Your total liabilities	\$	347,223.98
_			. –			
Part		arize Your Income and	•			
4.		Your Income (Official Foombined monthly incom		<i>I</i>	\$	0.00
5.		Your Expenses (Offician nonthly expenses from I			\$	4,948.75
Part	4: Answe	er These Questions for	Administrative and Stati	stical Records		
6.	-	•	er Chapters 7, 11, or 13? t on this part of the form. Ch	neck this box and submit this form to the court with yo	our other sc	hedules.
7.	■ Yes What kind o	of debt do you have?				
				lebts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your d	lebts are not primarily	consumer debts. You have	re nothing to report on this part of the form. Check thi	s <i>box</i> and s	ubmit this form to

page 1 of 2

Summary of Your Assets and Liabilities and Certain Statistical Information

Official Form 106Sum

Debtor 1	James A. McCarter	Case number (if known)	
	the court with your other schedules.		
	·		

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

\$			

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$
9g. <b>Total.</b> Add lines 9a through 9f.	\$

FIII IN THIS INTO	rmation to identify your case a	nd this filing:		
Debtor 1	James A. McCarter			
Daletan O	First Name	Middle Name Last Name		
Debtor 2 Spouse, if filing)	First Name	Middle Name Last Name		
Initari Otataa D	De aliminatari Carret fan thar FACT	EDN DICTRICT OF WACHINGTON		
united States E	sankruptcy Court for the: EAST	ERN DISTRICT OF WASHINGTON		
Case number				☐ Check if this is ar
				amended filing
Official E	orm 106A/B			
schedu	le A/B: Property	/		12/15
D	a bassa amada mala sa sa 1991 da 199	Alia anno acaldana a buildina to de celebratico de ce		
□ No. Go to P	,	st in any residence, building, land, or similar property?		
□ No. Go to Po ■ Yes. Where	art 2. e is the property?	that is the property? Check all that apply		
□ No. Go to Po ■ Yes. Where	art 2. e is the property?  Home		Do not deduct secured cl	
No. Go to Post Yes. Where Debtor's 6119 W.	art 2. e is the property?  Home Excell Avenue	What is the property? Check all that apply	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	ed claims on Schedule D:
No. Go to Post Yes. Where Debtor's 6119 W.	art 2. e is the property?  Home	What is the property? Check all that apply  ■ Single-family home  — Dupley or multi-unit building	the amount of any secure	ed claims on Schedule D:
No. Go to Post Yes. Where Debtor's 6119 W.	art 2. e is the property?  Home Excell Avenue	What is the property? Check all that apply  ■ Single-family home  □ Duplex or multi-unit building	the amount of any secure Creditors Who Have Clai	ed claims on Schedule D: ms Secured by Property.
No. Go to Post Yes. Where Debtor's 6119 W.  Street address	art 2.  a is the property?  Home Excell Avenue  s, if available, or other description	What is the property? Check all that apply  ■ Single-family home  □ Duplex or multi-unit building  □ Condominium or cooperative  □ Manufactured or mobile home	the amount of any secure Creditors Who Have Clair  Current value of the	d claims on Schedule D: ms Secured by Property.  Current value of the
No. Go to Post Yes. Where Debtor's 6119 W.	art 2.  a is the property?  Home Excell Avenue  s, if available, or other description	What is the property? Check all that apply  ■ Single-family home  □ Duplex or multi-unit building  □ Condominium or cooperative  □ Manufactured or mobile home	the amount of any secure Creditors Who Have Clai	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?
No. Go to Post Yes. Where Debtor's 6119 W.  Street addres	art 2. e is the property?  Home Excell Avenue s, if available, or other description  WA 99208-000	What is the property? Check all that apply  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land	the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$456,140.00	current value of the portion you own?  \$456,140.00
No. Go to Post Yes. Where Debtor's 6119 W.  Street addres	art 2. e is the property?  Home Excell Avenue s, if available, or other description  WA 99208-000	What is the property? Check all that apply  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property	the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$456,140.00  Describe the nature of y (such as fee simple, ten	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?
No. Go to Post Yes. Where Debtor's 6119 W. Street addres	art 2. e is the property?  Home Excell Avenue s, if available, or other description  WA 99208-000	What is the property? Check all that apply  Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$456,140.00  Describe the nature of y	Current value of the portion you own? \$456,140.00
□ No. Go to Pour Yes. Where Sold 19 W.  Street address  Spokane City	art 2.  Prison the property?  Home Excell Avenue  Is, if available, or other description  WA 99208-000  State ZIP Code	What is the property? Check all that apply  Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$456,140.00  Describe the nature of y (such as fee simple, ten	Current value of the portion you own? \$456,140.00
No. Go to Post Yes. Where Street address Spokane City	art 2.  Prison the property?  Home Excell Avenue  Is, if available, or other description  WA 99208-000  State ZIP Code	What is the property? Check all that apply  Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$456,140.00  Describe the nature of y (such as fee simple, ten	Current value of the portion you own? \$456,140.00
□ No. Go to Pour Yes. Where Sold 19 W.  Street address  Spokane City	art 2.  Prison the property?  Home Excell Avenue  Is, if available, or other description  WA 99208-000  State ZIP Code	What is the property? Check all that apply  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clais  Current value of the entire property? \$456,140.00  Describe the nature of y (such as fee simple, ten a life estate), if known.	Current value of the portion you own? \$456,140.00  your ownership interest lancy by the entireties, or
No. Go to Post Yes. Where Street address Spokane City	art 2.  Prison the property?  Home Excell Avenue  Is, if available, or other description  WA 99208-000  State ZIP Code	What is the property? Check all that apply  Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	the amount of any secure Creditors Who Have Clais  Current value of the entire property? \$456,140.00  Describe the nature of y (such as fee simple, ten a life estate), if known.	Current value of the portion you own? \$456,140.0

Official Form 106A/B Schedule A/B: Property page 1

City State  Spokane County  . Add the dollar value of the portion	Mhat is the property? Check all that apply  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Business  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this its property identification number:	the amount of any secu Creditors Who Have Classifications.  Current value of the entire property? \$2,933.00  Describe the nature of (such as fee simple, to a life estate), if known  Check if this is conducted the conducted in t	claims or exemptions. Put red claims on Schedule D: aims Secured by Property.  Current value of the portion you own? \$2,933.00 If your ownership interest enancy by the entireties, or .
Lease of 1432 W. Francis  Street address, if available, or other description  Spokane  City  State  Spokane  County  Add the dollar value of the portion	What is the property? Check all that apply  Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Business  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this its property identification number:	the amount of any secu Creditors Who Have Classifications.  Current value of the entire property? \$2,933.00  Describe the nature of (such as fee simple, to a life estate), if known  Check if this is conducted the conducted in t	current value of the portion you own?  \$2,933.00  f your ownership interest enancy by the entireties, or .
Street address, if available, or other description  Spokane WA 992  City State  Spokane  County  Add the dollar value of the portion	Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other Business  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	the amount of any secu Creditors Who Have Classifications.  Current value of the entire property? \$2,933.00  Describe the nature of (such as fee simple, to a life estate), if known  Check if this is conducted the conducted in t	red claims on Schedule D: aims Secured by Property.  Current value of the portion you own?  \$2,933.00  If your ownership interest enancy by the entireties, or .
Street address, if available, or other description  Spokane WA 992  City State  Spokane  County  Add the dollar value of the portion	Condominium or cooperative  Manufactured or mobile home  Land Investment property Timeshare Other Business  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	Current value of the entire property? \$2,933.00  Describe the nature of (such as fee simple, to a life estate), if known  Check if this is co (see instructions)	Current value of the portion you own?  \$2,933.00  If your ownership interest enancy by the entireties, or
Spokane City State  Spokane County  Add the dollar value of the portion	Manufactured or mobile home  Land  Investment property  Timeshare  Other Business  Who has an interest in the property? Check one  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this ite property identification number:	Current value of the entire property? \$2,933.00  Describe the nature of (such as fee simple, to a life estate), if known  Check if this is co (see instructions)	Current value of the portion you own? \$2,933.00  If your ownership interest enancy by the entireties, or
Spokane County  Add the dollar value of the portion	Manufactured or mobile home  Land  Investment property  Timeshare  Other Business  Who has an interest in the property? Check one  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this ite property identification number:	entire property? \$2,933.00  Describe the nature of (such as fee simple, to a life estate), if known  Check if this is co (see instructions)	portion you own? \$2,933.00  If your ownership interest enancy by the entireties, or .
Spokane County  Add the dollar value of the portion	D5-0000  Land Investment property Timeshare Other Business  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	entire property? \$2,933.00  Describe the nature of (such as fee simple, to a life estate), if known  Check if this is co (see instructions)	portion you own? \$2,933.00  If your ownership interest enancy by the entireties, or .
Spokane County  Add the dollar value of the portion	Investment property  Timeshare Other Business  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	entire property? \$2,933.00  Describe the nature of (such as fee simple, to a life estate), if known  Check if this is co (see instructions)	portion you own? \$2,933.00  If your ownership interest enancy by the entireties, or .
Spokane County  Add the dollar value of the portion	Timeshare Other Business  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	Describe the nature of (such as fee simple, to a life estate), if known  Check if this is co (see instructions)	f your ownership interest enancy by the entireties, or
County  Add the dollar value of the portion	Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	(such as fee simple, to a life estate), if known  Check if this is co (see instructions)	enancy by the entireties, or
County  Add the dollar value of the portion	Who has an interest in the property? Check one  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	(such as fee simple, to a life estate), if known  Check if this is co (see instructions)	enancy by the entireties, or
County  Add the dollar value of the portion	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	Check if this is co	
County  Add the dollar value of the portion	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	(see instructions)	ommunity property
County  Add the dollar value of the portion	Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	(see instructions)	ommunity property
Add the dollar value of the portion	At least one of the debtors and another  Other information you wish to add about this ite  property identification number:	(see instructions)	ommunity property
	Other information you wish to add about this ite property identification number:	(see instructions)	
	property identification number:	em, such as local	
	. Write that number here		\$459,073.00
t 2: Describe Your Vehicles			
Yes			
.1 Make: <b>Chevy</b>	Who has an interest in the property? Check one		claims or exemptions. Put
Trailblanar			red claims on Schedule D: laims Secured by Property.
Wiodei.	Debtor 1 only	Creditors Write Flave Ci	airis Secured by Property.
Year: 2002 Approximate mileage:	Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other information:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property:	portion you own:
Carlot anomation.	At least one of the deptors and another		
	Check if this is community property (see instructions)	\$1,500.00	\$1,500.00

page 2

Schedule A/B: Property

Official Form 106A/B

De	ebtor 1	James A. Mc	Carter   Case number	(if known)
6.		old goods and fu es: Major appliand	urnishings ces, furniture, linens, china, kitchenware	
	Yes.	Describe		
			Household Goods and Furnishings	\$2,000.00
			<u> </u>	
7.	□ No	es: Televisions ar	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners phones, cameras, media players, games	s; music collections; electronic devices
			Electronics	\$1,000.00
8.	Example No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; sta ns, memorabilia, collectibles	amp, coin, or baseball card collections;
9.	Example No	ent for sports and es: Sports, photogodous musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
			Camera	\$250.00
10.	□ No		, shotguns, ammunition, and related equipment	
			Winchester 1300	\$300.00
11.	□ No		othes, furs, leather coats, designer wear, shoes, accessories	
			Wearing Apparel	\$200.00
	□ No		velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches	s, gems, gold, silver
			Jewelry	\$20.00
13.	Examp ☐ No	rm animals bles: Dogs, cats, b Describe		
			Dog	\$75.00

Official Form 106A/B Schedule A/B: Property page 3

	James A. McCarter	Case number (if	known)
14. <b>Any o</b> ■ No	other personal and household items yo	ou did not already list, including any health aids you did not	t list
	s. Give specific information		
		from Part 3, including any entries for pages you have attach	s3,845.00
Part 4: [	Describe Your Financial Assets		
Do you o	own or have any legal or equitable inte	erest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	mples: Money you have in your wallet, in	your home, in a safe deposit box, and on hand when you file you	ur petition
		Cash	\$1,500.00
Exar		cial accounts; certificates of deposit; shares in credit unions, brok ccounts with the same institution, list each.  Institution name:	kerage houses, and other similar
	17.1.	Chase	\$500.00
	ls, mutual funds, or publicly traded sto mples: Bond funds, investment accounts	ocks with brokerage firms, money market accounts	
Exar ■ No	mples: Bond funds, investment accounts		
Exar ■ No □ Yes 19. <b>Non-</b>	mples: Bond funds, investment accounts in the second secon	with brokerage firms, money market accounts	interest in an LLC, partnership, and
Exar  No Yes  19. Non- joint  No	mples: Bond funds, investment accounts in Institution or publicly traded stock and interests in in	with brokerage firms, money market accounts issuer name: incorporated and unincorporated businesses, including an	
Exar  No Yes  19. Non- joint  No	Institution or publicly traded stock and interests in it venture  s. Give specific information about them Name of entity:  100% interest	with brokerage firms, money market accounts issuer name: incorporated and unincorporated businesses, including an	
Exar  No Yes  19. Non- joint No Yes  20. Gove Nega Non-	Institution or publicly traded stock and interests in it venture  s. Give specific information about them Name of entity:  100% interest (Total assets : \$196,352.09)  ernment and corporate bonds and other oriable instruments include personal checkens.	with brokerage firms, money market accounts issuer name: incorporated and unincorporated businesses, including an  % of ownership in James A. McCarter DDS, P.S.	o:
Exar  No Yes  19. Non- joint No Yes  20. Gove Nego Non- No Yes	Institution or publicly traded stock and interests in its venture  s. Give specific information about them Name of entity:  100% interest (Total assets: \$196,352.09)  ernment and corporate bonds and other or interest in its venture.  S. Give specific information about them Name of entity:  100% interest (Total assets: \$196,352.09)  ernment and corporate bonds and other or interest include personal check the instruments are those you can be considered instruments are those you can be considered instruments.  S. Give specific information about them Issuer name:	with brokerage firms, money market accounts issuer name: incorporated and unincorporated businesses, including an  % of ownership in James A. McCarter DDS, P.S. = \$20,000 Total debts =  er negotiable and non-negotiable instruments eks, cashiers' checks, promissory notes, and money orders.	o:
Exar  No Yes  19. Non- joint No Yes  20. Gove Nego Non- No Yes  21. Retire Exar	Institution or publicly traded stock and interests in its venture  s. Give specific information about them Name of entity:  100% interest (Total assets: \$196,352.09)  ernment and corporate bonds and other or pension accounts are those you can be supported in the support of	with brokerage firms, money market accounts issuer name: incorporated and unincorporated businesses, including an  % of ownership in James A. McCarter DDS, P.S. = \$20,000 Total debts =  er negotiable and non-negotiable instruments eks, cashiers' checks, promissory notes, and money orders.	% <b>\$0.00</b>
Exar  No Yes  19. Non- joint No Yes  20. Gove Nego Non- No Yes  21. Retire Exar	Institution or publicly traded stock and interests in it venture  s. Give specific information about them Name of entity:  100% interest (Total assets: \$196,352.09)  ernment and corporate bonds and other or public information about them Sernment and corporate bonds and other or pension accounts.	with brokerage firms, money market accounts issuer name: incorporated and unincorporated businesses, including an % of ownership in James A. McCarter DDS, P.S. = \$20,000 Total debts = er negotiable and non-negotiable instruments eks, cashiers' checks, promissory notes, and money orders. nnot transfer to someone by signing or delivering them.	% <b>\$0.00</b>

page 4

Schedule A/B: Property

Official Form 106A/B

De	ebtor 1	James A. M	<b>/</b> IcCarter		Case number (if know	n)
	Your sh	hare of all unus			e service or use from a company gas, water), telecommunications comp	anies, or others
				Institution name	or individual:	
	_	ies (A contract	for a periodic payment of mo	ney to you, either for life	or for a number of years)	
	■ No □ Yes		Issuer name and description.			
			tion IRA, in an account in a , 529A(b), and 529(b)(1).	qualified ABLE progra	m, or under a qualified state tuition p	orogram.
	☐ Yes		Institution name and descripti	on. Separately file the re	cords of any interests.11 U.S.C. § 521(	c):
	Trusts, ■ No	, equitable or f	iuture interests in property	other than anything lis	sted in line 1), and rights or powers e	xercisable for your benefit
	☐ Yes.	Give specific i	nformation about them			
			trademarks, trade secrets, a omain names, websites, proce			
		Give specific i	nformation about them			
	Examp  ■ No	oles: Building p			ldings, liquor licenses, professional lice	nses
			nformation about them			
Mo	oney or p	property owed	i to you?			Current value of the portion you own?  Do not deduct secured claims or exemptions.
	_	unds owed to	you			
	■ No □ Yes. 0	Give specific ir	nformation about them, includ	ng whether you already	filed the returns and the tax years	
	Examp ■ No	support  oles: Past due of		support, child support, n	naintenance, divorce settlement, prope	rty settlement
	Examp	oles: Unpaid wa benefits; u	inpaid loans you made to son		, sick pay, vacation pay, workers' comp	pensation, Social Security
	Yes.	Give specific i	nformation			
			Monies or	wed by James A. Mc	Carter DDS, P.S. (Uncollectible)	\$63,500.00
		ts in insuranc bles: Health, dis		th savings account (HSA	.); credit, homeowner's, or renter's insur	rance
		Name the insu	rance company of each policy Company name:	and list its value.	Beneficiary:	Surrender or refund value:
			Term Life Insuran	ce - No CSV		\$0.00
					<u> </u>	

page 5

Schedule A/B: Property

Official Form 106A/B

Debtor	James A. McCarter	Case number (if known)	
If y	y interest in property that is due you from someone who has you are the beneficiary of a living trust, expect proceeds from a li meone has died.		eive property because
■ N	lo		
ΠY	es. Give specific information		
	ims against third parties, whether or not you have filed a law tamples: Accidents, employment disputes, insurance claims, or ratio		
ПΥ	es. Describe each claim		
34. <b>O</b> th ■ N	ner contingent and unliquidated claims of every nature, include	uding counterclaims of the debtor and rights t	o set off claims
ΠY	es. Describe each claim		
	y financial assets you did not already list		
□N			
<b>—</b> 1	es. Give specific information		
	Loss Carry Forward		\$43,640.00
	dd the dollar value of all of your entries from Part 4, includir or Part 4. Write that number here		\$157,309.46
Part 5:	Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real estate in Part 1.	
37. <b>Do y</b>	· /ou own or have any legal or equitable interest in any business-relat	ed property?	
■ No	o. Go to Part 6.		
☐ Ye	es. Go to line 38.		
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You lf you own or have an interest in farmland, list it in Part 1.	I Own or Have an Interest In.	
_	you own or have any legal or equitable interest in any farm- No. Go to Part 7.	or commercial fishing-related property?	
_	Yes. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above	
Ex	you have other property of any kind you did not already list amples: Season tickets, country club membership	?	
■ N			
ЦΥ	es. Give specific information		
54. <b>A</b> c	dd the dollar value of all of your entries from Part 7. Write th	at number here	\$0.00
-	• • • • • • • • • • • • • • • • • • • •		

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1 James A. McCarter Case number (if known) List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$459,073.00 56. Part 2: Total vehicles, line 5 \$1,500.00 57. Part 3: Total personal and household items, line 15 \$3,845.00 58. Part 4: Total financial assets, line 36 \$157,309.46 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$162,654.46 Copy personal property total \$162,654.46 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$621,727.46

Official Form 106A/B Schedule A/B: Property page 7

Fill in this infor				
Debtor 1	James A. McCart	er		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F WASHINGTON	
Case number _ (if known)				☐ Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Schedule A/B that lists this property	portion you own		ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Debtor's Home 6119 W. Excell	\$456,140.00			Wash. Rev. Code §§ 6.13.010	
	Avenue Spokane, WA 99208 Spokane County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	6.13.020, 6.13.030	
	2002 Chevy Trailblazer Line from Schedule A/B: 3.1	\$1,500.00			Wash. Rev. Code §	
	Line from Scheaule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	6.15.010(1)(d)(iii)	
	Household Goods and Furnishings Line from Schedule A/B: 6.1	\$2,000.00			Wash. Rev. Code §	
Line	Line from Schedule A/B: 0.1			100% of fair market value, up to any applicable statutory limit	6.15.010(1)(d)(i)	
	Electronics	\$1,000.00			Wash. Rev. Code §	
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	6.15.010(1)(d)(i)	
	Camera	\$250.00			Wash. Rev. Code §	
	Line from Schedule A/B: 9.1		•	100% of fair market value, up to any applicable statutory limit	6.15.010(1)(d)(ii)	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debtor	James A. McCarter			Case number (if known)	
	ief description of the property and line on thedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
		Schedule A/B	One	to the box for each exemption.	
	inchester 1300 ne from Schedule A/B: 10.1	\$300.00			Wash. Rev. Code § 6.15.010(1)(d)(ii)
LII	ie nom <i>Schedule A/D</i> . 10.1			100% of fair market value, up to any applicable statutory limit	0.10.010(1)(α)(ιι)
	earing Apparel	\$200.00			Wash. Rev. Code § 6.15.010(1)(a)
LII	ie IIOIII S <i>Criedule A/B.</i> 11.1			100% of fair market value, up to any applicable statutory limit	0.13.010(1)(a)
	ewelry ne from Schedule A/B: 12.1	\$20.00			Wash. Rev. Code § 6.15.010(1)(a)
LII	ie IIOIII S <i>Criedule AVB.</i> 12.1			100% of fair market value, up to any applicable statutory limit	6.13.010(1)(a)
	og	\$75.00			Wash. Rev. Code §
LII	ne from Schedule A/B: 13.1			100% of fair market value, up to any applicable statutory limit	6.15.010(1)(d)(ii)
_	ash	\$1,500.00			Wash. Rev. Code § 6.15.010(1)(d)(ii)
LII	ne from Schedule A/B: <b>16.1</b>			100% of fair market value, up to any applicable statutory limit	6.13.010(1)(a)(ii)
_	hase	\$500.00			Wash. Rev. Code §
LII	ne from Schedule A/B: <b>17.1</b>			100% of fair market value, up to any applicable statutory limit	6.15.010(1)(d)(ii)
	raditional IRA	\$48,169.46			Wash. Rev. Code § 6.15.020
LII	ne from Schedule A/B: <b>21.1</b>			100% of fair market value, up to any applicable statutory limit	
	erm Life Insurance - No CSV	\$0.00			Wash. Rev. Code § 48.18.410
LII	ie IIIIII <i>Schedule A/B</i> . <b>31.1</b>			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption ubject to adjustment on 4/01/25 and every			led on or after the date of adjustmen	of )
(S 		5 yours and marior of	,JUJ 11	iod on or anor the date or adjustifier	··· <i>j</i>
	Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No			•	
	■ Yes				

Official Form 106C

Schedule C: The Property You Claim as Exempt

Fill in this informa	ation to identify you	r case:				
Debtor 1	James A. McCar	ter				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	cruptcy Court for the:	EASTERN DISTRICT OF WAS	SHINGTON			
Case number						if this is an ded filing
Official Form		Who Have Claims	Secure	nd by Property	,	12/15
ochedule L	o. Creditors	Willo Have Claims	<u>Jecui e</u>	a by Froperty	<u>y</u>	12/13
		f two married people are filing togeth out, number the entries, and attach it				
1. Do any creditors h	ave claims secured by	your property?				
☐ No. Check t	his box and submit th	nis form to the court with your other	schedules.	You have nothing else to	report on this form.	
■ Ves Fill in a	all of the information b	pelow		· ·	·	
		ociow.				
	Secured Claims			. Column A	Column B	Column C
for each claim. If mor	e than one creditor has	nore than one secured claim, list the cre a particular claim, list the other creditors cal order according to the creditor's name	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 CFF Invest	ors, LLC	Describe the property that secures	the claim:	\$22,684.05	\$22,684.05	\$0.00
Creditor's Name	erside Ave.,	Lease of 1432 W. Francis Spokane, WA 99205 Spokar County	ne			
Suite 300 Spokane, V	,	As of the date you file, the claim is: apply.  Contingent	Check all that			
Number, Street, C	City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such as car loan)	mortgage or s	ecured		
Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the	debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this clai community debt		■ Other (including a right to offset)	Business	Lease \$2,933.00 per	month	

Official Form 106D

Date debt was incurred \_

Schedule D: Creditors Who Have Claims Secured by Property

Last 4 digits of account number

Debtor 1 James A. M	lcCarter			Case number (if known)		
First Name	Middle Name	Last Name				
2.2 Chase	De	scribe the property that secures	the claim:	\$84,129.35	\$456,140.00	\$0.00
Creditor's Name		ebtor's Home 6119 W. Exc			<u> </u>	******
	A	venue Spokane, WA 9920	В			
Mail Code LA4-		ookane County				
700 Kansas Lar	ne As app	of the date you file, the claim is:	Check all that			
Monroe, LA 712	00 4774	Contingent				
Number, Street, City, Sta	te & Zip Code	Unliquidated				
Who owes the debt? Che		Disputed ature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as	mortgage or se	cured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 o	only $\Box$	Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debto	ors and another	Judgment lien from a lawsuit				
☐ Check if this claim relacement community debt	ates to a	Other (including a right to offset)	First Mort	gage		
Date debt was incurred _		Last 4 digits of account num	ber			
2.3 Mountain West	Bank De	scribe the property that secures	the claim:	\$25,515.14	\$456,140.00	\$0.00
Creditor's Name	Cı	oss collateralized with Se	econd			
		ortgage				
		ebtor's Home 6119 W. Exc	-			
		venue Spokane, WA 99208	В			
4051		ookane County of the date you file, the claim is:	Check all that			
125 Ironwood D	orive app	bly.				
Coeur D Alene,		Contingent				
Number, Street, City, Sta		Unliquidated				
Who owes the debt? Che		Disputed ature of lien. Check all that apply.				
☐ Debtor 1 only	_					
Debtor 2 only	_	An agreement you made (such as car loan)	mortgage or se	curea		
Debtor 1 and Debtor 2 of	only $\square$	Statutory lien (such as tax lien, me	echanic's lien)			
At least one of the debto	_	Judgment lien from a lawsuit	,			
Check if this claim rela		Other (including a right to offset)	Loan obta	ined for Business		
Date debt was incurred _		Last 4 digits of account num	ber			
Mountain West						
Bank/SBA	De	scribe the property that secures	the claim:	\$80,477.26	\$456,140.00	\$0.00
Creditor's Name	De	ebtor's Home 6119 W. Exc	ell			
	A	venue Spokane, WA 9920	В			
		ookane County				
125 Ironwood D	Prive As	of the date you file, the claim is:	Check all that			
Coeur D Alene,	ID 00044	Contingent				
Number, Street, City, Sta		Unliquidated				
		Disputed				
Who owes the debt? Che		ture of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as	mortgage or se	cured		
Debtor 2 only		car loan)	ahaniala !!\			
Debtor 1 and Debtor 2 of	· –	Statutory lien (such as tax lien, me Judgment lien from a lawsuit	ecnanic's lien)			
At least one of the debto		-	Concud M	autagana laan aht-!	ad for Duo!	
Check if this claim rela	ates to a	Other (including a right to offset)	Second M	ortgage. Loan obtaine	eu tor Business	
Date debt was incurred _		Last 4 digits of account num	ber			

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 3

Debtor 1	James A. M	<b>McCarter</b>		Case number (if known)	
	First Name	Middle Name	Last Name		Т

Add the dollar value of your entries in Column A on this page. Write that number here: \$212,805.80

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$212,805.80

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

[]	Name, Number, Street, City, State & Zip Code Mountain West Bank 12321 E. Mission Avenue Spokane Valley, WA 99216	On which line in Part 1 did you enter the creditor?
[]	Name, Number, Street, City, State & Zip Code  Mountain West Bank PO Box 1059 Coeur D Alene, ID 83816	On which line in Part 1 did you enter the creditor?
[]	Name, Number, Street, City, State & Zip Code Mountain West Bank 2123 N. Government Way Coeur D Alene, ID 83814	On which line in Part 1 did you enter the creditor?
[]	Name, Number, Street, City, State & Zip Code Mountain West Bank 101 Ironwood Drive, Suite 252 Coeur D Alene, ID 83816	On which line in Part 1 did you enter the creditor? _2.3_  Last 4 digits of account number
[]	Name, Number, Street, City, State & Zip Code Small Business Administration 801 W. Riverside Avenue Spokane, WA 99201	On which line in Part 1 did you enter the creditor?

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Eill is	n this inform	nation to identify your o	350:				
Debte	OI I	James A. McCarte	Middle Name	Last Name			
Debte							
(Spous	se if, filing)	First Name	Middle Name	Last Name			
Unite	d States Bar	kruptcy Court for the:	EASTERN DISTRICT OF	WASHINGTON			
	number						
(if knov	wn)					_	if this is an
						amend	led filing
Offic	cial Form	106E/F					
Sch	edule E	F: Creditors W	ho Have Unsecu	red Claims			12/15
Sched Sched left. At	ule G: Execut lule D: Credito ttach the Cont and case num	ory Contracts and Unexpi ors Who Have Claims Secu	that could result in a claim. red Leases (Official Form 10 tred by Property. If more spice. If you have no information secured Claims	06G). Do not include any ace is needed, copy the	y creditors with partially s Part you need, fill it out,	secured claims that a number the entries i	are listed in n the boxes on the
		rs have priority unsecured					
	No. Go to Pa	art 2.					
	Yes.						
id p	dentify what typ ossible, list the	e of claim it is. If a claim has claims in alphabetical orde	. If a creditor has more than o s both priority and nonpriority r according to the creditor's na ticular claim, list the other cre	amounts, list that claim he ame. If you have more tha	ere and show both priority a	and nonpriority amoun	ts. As much as
(F	For an explana	tion of each type of claim, se	ee the instructions for this form	n in the instruction bookle	t.) Total claim	Priority	Nonpriority
2.1	State of	Washington	Last 4 digits of	account number	\$159.00	amount \$159.00	amount \$0.00
	Priority Cre	ditor's Name					
	PO Box	nent of Revenue 47476 I, WA 98504-7464	When was the o	lebt incurred?		-	
	Number St	reet City State Zip Code	As of the date y	rou file, the claim is: Che	eck all that apply		
		the debt? Check one.	☐ Contingent				
	Debtor 1 or		☐ Unliquidated				
	Debtor 2 or	•	☐ Disputed				
	Debtor 1 ar	nd Debtor 2 only	Type of PRIORI	TY unsecured claim:			
	At least one	e of the debtors and anothe	☐ Domestic sup	oport obligations			
	☐ Check if th	nis claim is for a commun	ity debt Taxes and ce	ertain other debts you owe	e the government		
	Is the claim s	ubject to offset?	☐ Claims for de	eath or personal injury whi	le you were intoxicated		
	■ No		Other. Specif	fy			
	☐ Yes			Business Debt/	Personal Liability		-
Part :	2: List All	of Your NONPRIORIT	/ Unsecured Claims				
3. D	o any credito	rs have nonpriority unsec	ured claims against you?				
	☐ No. You hav	e nothing to report in this pa	art. Submit this form to the cou	ırt with your other schedu	les.		
	Yes.						
u th	nsecured claim	n, list the creditor separately	ims in the alphabetical orde for each claim. For each clair at the other creditors in Part 3.	n listed, identify what type	of claim it is. Do not list cla	aims already included	in Part 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 7

Debtor 1 James A. McCarter	Case number (if known)				
Aesthetic Milling Systems (AMS) Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00			
2425 W. Hayden Avenue Hayden, ID 83835	When was the debt incurred?				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Business Debt (\$6,000) Notice only				
.2 Banner Bank MC Nonpriority Creditor's Name	Last 4 digits of account number 7692	\$3,696.73			
PO Box 2181 Walla Walla, WA 99362-0181	When was the debt incurred?				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Business Debt/Personal Guarantee				
3 Burkhart Dental Supply	Last 4 digits of account number	\$0.00			
Nonpriority Creditor's Name 2502 S. 78th Street Tacoma, WA 98409-9053	When was the debt incurred?				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims				
■ No	Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify				

Official Form 106 E/F

Debtor	James A. McCarter	Case number (if known)				
4.4	Burkhart Equipment Finance/ Nonpriority Creditor's Name	Last 4 digits of account number	\$6,734.40			
	US Bank 1310 Madrid Street, Suite 101	When was the debt incurred?				
	Marshall, MN 56258  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Business Debt/Personal Guarantee				
4.5	Citibank/Costco Anywhere Visa Nonpriority Creditor's Name	Last 4 digits of account number 9327	\$22,479.53			
	6716 Grade Lane Building 9, Suite 9 Louisville, KY 40213	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Charges (Personal)				
4.6	Citibank/Costco Anywhere Visa	Last 4 digits of account number 3087	\$20,919.35			
	Nonpriority Creditor's Name 6716 Grade Lane Building 9, Suite 9	When was the debt incurred?				
	Louisville, KY 40213  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	The of the date year me, the stain is. Shook all that apply				
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	<u></u>	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Business Debt/Personal Gurantee				

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

Debto	James A. McCarter	Case number (if known)				
4.7	Eric M. Steven	Last 4 digits of account number	\$0.00			
	Nonpriority Creditor's Name Steven Law Office 1319 W. Dean Avenue Spokane, WA 99201	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Notice only				
4.8	James A. McCarter, DDS, P.S.  Nonpriority Creditor's Name	Last 4 digits of account number	\$16,489.00			
	6119 W. Excell Avenue Spokane, WA 99208	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Business Debt/CoDebtor				
4.9	NAI Black	Last 4 digits of account number	\$0.00			
	Nonpriority Creditor's Name 107 S. Howard, Suite 500 Spokane, WA 99201	When was the debt incurred?				
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Notice only				

Official Form 106 E/F

James A. McCarter	Case number (if known)				
Patricia McCarter	Last 4 digits of account number	\$50,000.00			
Nonpriority Creditor's Name PO Box 68	When was the debt incurred?	<del></del>			
Hay Springs, NE 69347	- Acceptate that a file developed to the control of				
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐Yes	Other. Specify Business Loan				
Pattorson Dental Supply, Inc.	Last 4 digits of account number	\$0.00			
Nonpriority Creditor's Name		*****			
28244 Network Place	When was the debt incurred?				
Chicago, IL 60673-1282 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
$\square$ Check if this claim is for a community	☐ Student loans				
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
☐Yes	■ Other. Specify Notice only				
Spokane County Treasurer	Last 4 digits of account number	\$7,000.00			
Nonpriority Creditor's Name	When was the debt incurred?	<b>4.</b> ,			
Spokane, WA 99260 Number Street City State Zip Code	As of the date you file the plains in Charles II that are in				
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
☐ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Business Debt/Personal Property Taxes				

Official Form 106 E/F

Debtor 1 James A. McCarter		Case number (if known)			
4.1	US Bank Nonpriority Creditor's Name PO Box 790408	Last 4 digits of account number 0267  When was the debt incurred?	\$568.40		
	Saint Louis, MO 63179-0408  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Business Debt/Personal Guarantee			
4.1	US Bank	Last 4 digits of account number 1287	\$2,786.38		
	Nonpriority Creditor's Name PO Box 790408	When was the debt incurred?			
	Saint Louis, MO 63179-0408  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	,			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Business Debt/Personal Guarantee			
4.1	Wells Fargo LOC	Last 4 digits of account number	\$3,585.39		
<u> </u>	Nonpriority Creditor's Name SBL	When was the debt incurred?	·		
	PO Box 29482 Phoenix, AZ 85038-8650				
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Business Line of Credit/Personal Guarantee			

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

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<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

James A. McCarter		Case number (if known)
have more than one creditor for any of the deb notified for any debts in Parts 1 or 2, do not fill		t the additional creditors here. If you do not have additional persons to be
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?
Black Commercial, Inc.	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
A NAI Black Company Attn: Jeff K. Johnson, SIOR, CCIM 801 W. Riverside Ave., Suite 300 Spokane, WA 99201		■ Part 2: Creditors with Nonpriority Unsecured Claims
•	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?
Citi Cards	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 78019 Phoenix, AZ 85062-8019		■ Part 2: Creditors with Nonpriority Unsecured Claims
·	Last 4 digits of account number	

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 159.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 159.00
	01	On the Advance	01	Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 134,259.18
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 134,259.18

Fill in this infor	mation to identify your	case:			
Debtor 1	James A. McCart				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F WASHINGTON		
Case number (if known)					Check if this is an
					amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 CFF Investors, LLC Attn: Jeff Johnson & Jeff McKloskey 801 W. Riverside Ave., Suite 300 Spokane, WA 99201	Debtor, as Lessee, leases from CFF Investors, LLC, as Landlord, that real property commonly known as 1432 W. Francis, Spokane, Washington 99205, pursuant to a Lease Agreement dated October 27, 2014, for a period for 120 months, requiring estimated current lease payments of \$2,933.00/month (Reject)

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Fill in thi	s information to identify your	case:			
Debtor 1	James A. McCart	er			
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:				
Case nun	nber				
(if known)					Check if this is an amended filing
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
people are		ally responsible for supplying boxes on the left. Attach the	ng correct informat	tion. If more space is no	ate as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case, do r	not list either spouse	as a codebtor.	
□ No ■ Ye					
	thin the last 8 years, have you				states and territories include
_	o. Go to line 3. es. Did your spouse, former spo	use, or legal equivalent live wi	ith you at the time?		
	■ No □ Yes.				
	In which community state	e or territory did you live?	-NONE-	. Fill in the name an	d current address of that person.
	Name of your spouse, former sp Number, Street, City, State & Zip				
in lin Form	e 2 again as a codebtor only i	f that person is a guarantor	or cosigner. Make	sure you have listed th	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1	James A. McCarter, DDS, 6119 W. Excell Avenue Spokane, WA 99208	P.S.		■ Schedule D, lir □ Schedule E/F, □ Schedule G Mountain West E	line
3.2	James A. McCarter, DDS, 6119 W. Excell Avenue Spokane, WA 99208	P.S.		■ Schedule D, lir □ Schedule E/F, □ Schedule G	line

Official Form 106H Schedule H: Your Codebtors Page 1 of 2

	Additional Page to List More Codebtors					
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:				
3.3	James A. McCarter, DDS, P.S.	☐ Schedule D, line				
	6119 W. Excell Avenue	■ Schedule E/F, line 2.1				
	Spokane, WA 99208	☐ Schedule G				
		State of Washington				
3.4	James A. McCarter, DDS, P.S. 6119 W. Excell Avenue	☐ Schedule D, line				
	Spokane, WA 99208	Schedule E/F, line 4.2				
	<b>Openium, 11110220</b>	☐ Schedule G Banner Bank MC				
		Bailler Bailt MO				
3.5	James A. McCarter, DDS, P.S.	☐ Schedule D, line				
0.0	6119 W. Excell Avenue	■ Schedule E/F, line 4.4				
	Spokane, WA 99208	☐ Schedule G				
		Burkhart Equipment Finance/				
3.6	James A. McCarter, DDS, P.S.	☐ Schedule D, line				
0.0	6119 W. Excell Avenue	■ Schedule E/F, line4.6				
	Spokane, WA 99208	☐ Schedule G				
		Citibank/Costco Anywhere Visa				
3.7	James A. McCarter, DDS, P.S.	☐ Schedule D, line				
	6119 W. Excell Avenue Spokane, WA 99208	■ Schedule E/F, line <u>4.13</u>				
	Spokalie, WA 99200	☐ Schedule G				
		US Bank				
3.8	James A. McCarter, DDS, P.S.	Cahadula D. lina				
5.0	6119 W. Excell Avenue	☐ Schedule D, line  ■ Schedule E/F, line 4.14				
	Spokane, WA 99208	☐ Schedule G				
		US Bank				
3.9	James A. McCarter, DDS, P.S.	☐ Schedule D, line				
	6119 W. Excell Avenue Spokane, WA 99208	■ Schedule E/F, line <u>4.15</u>				
	Spokalie, WA 99200	☐ Schedule G				
		Wells Fargo LOC				
2 40	James A McCarter DDS B S	C Ochodolo D "				
3.10	James A. McCarter, DDS, P.S. 6119 W. Excell Avenue	☐ Schedule D, line				
	Spokane, WA 99208	■ Schedule E/F, line4.12 □ Schedule G				
		Spokane County Treasurer				
		· ·				

Official Form 106H Schedule H: Your Codebtors Page 2 of 2

						1				
Fill	in this information to identify your c	ase:								
Del	otor 1 James A. M	cCarter								
	otor 2 puse, if filing)				_					
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF WASHINGTON							
(If kr	se number  fficial Form 106		-			□ A		ed filing ent showin	g postpetition ollowing date:	
_	fficial Form 106I					N	1M / DD/ \	/YYY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  t 1: Describe Employment  Fill in your employment	ır spouse is not filing w	ith you, do not inclu onal pages, write yo	de infori	natio	on about	t your spoumber (if	ouse. If me known). <i>A</i>	ore space is Inswer every	needed,
	information.		Debtor 1				Debtor :	2 or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	<ul><li>☐ Employed</li><li>■ Not employed</li></ul>				☐ Empl	oyed mployed		
		Occupation	Dentist							
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?				_			
Par	t 2: Give Details About Mo	nthly Income								
spoo If yo	mate monthly income as of the duse unless you are separated.  u or your non-filing spouse have m	ore than one employer, co								
mor	e space, attach a separate sheet to	this form.				For Del	otor 1		btor 2 or	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly over	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

			For Debtor 1			For Debtor 2 or non-filing spouse	
	Copy	y line 4 here	4.	\$ 0.00		N/A	
5.		all payroll deductions:					
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$ 0.00	) \$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$ 0.00		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$ 0.00	<u> </u>	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$ 0.00		N/A	
	5e.	Insurance	5e.	\$ 0.00		N/A	
	5f.	Domestic support obligations	5f.	\$ 0.00	\$	N/A	
	5g.	Union dues	5g.	\$		N/A	
	5h.	Other deductions. Specify:	_ 5h.+	\$0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$0.00	)\$	N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	<u> </u>	N/A	
8.	8b. 8c. 8d. 8e. 8f.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8a. 8b. 8c. 8d. 8e.	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ 0	N/A N/A N/A N/A	
	8g.	Pension or retirement income	_ 8g.	\$ 0.00	<u> </u>	N/A	
	8h.	Other monthly income. Specify:	8h.+			N/A	
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	[	\$ 0.00		N/A 	0.00
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.   \$ _	0.00	Φ	<b> /A </b>   =   \$	0.00
	State Inclu- other Do no Spec	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your riends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a	depend	e to pay expenses l	isted in Sche	edule J. 11. +\$	0.00
	Write appli	e that amount on the S <i>ummary of Schedules</i> and <i>Statistical Summary of Certain</i> es	n Liabil		ata, if it	12. \$Combined monthly inc	0.00
13.	□ □	ou expect an increase or decrease within the year after you file this form?  No.					
		Yes. Explain: Debtor previously earned an average \$3,550.00/m business and is seeking other employment.  Debtor submitted applications for new employment Debtor also applying for Locum Tenens work on income of \$6,000 per month.	ent.				osed

Official Form 106l Schedule I: Your Income page 2

ΕIII	in this informat	tion to identify yo	our case:			1		
Deb	otor 1	James A. Mo	Carter				eck if this is:	
Deb	otor 2						An amended filing  A supplement sho	wing postpetition chapter
l	ouse, if filing)							f the following date:
Unit	ed States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF WASI	HINGTON		MM / DD / YYYY	
Cas	e number							
l	nown)							
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	ises				12/15
Be info nur	as complete a ormation. If me mber (if know	and accurate as ore space is ne n). Answer ever	possible. eded, atta ry question	If two married people ch another sheet to thi				
Par 1.	t 1: Descri	ibe Your House	hold					
١.	-							
	■ No. Go to		in a aanar	nto haveahald?				
			ın a separa	ate household?				
	□ No		st file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of De	ebtor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents i	names.						☐ Yes
								□ No
								Yes
								□ No
								Yes
								□ No □ Yes
3.	Do vour exp	enses include	_		-		<del></del> =	_ Li Yes
0.	expenses of yourself and	f people other t d your depende	han nts? □	No Yes				
		ate Your Ongoi						
exp								apter 13 case to report of the form and fill in the
				government assistance luded it on <i>Schedule I</i> :				
(Off	ficial Form 10	6I.)					Your exp	Denses
4.		r home owners		ses for your residence r lot.	Include first mortgag	e 4.	\$	1,302.24
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.	·	0.00
	•	•		ıpkeep expenses		4c.	\$	50.00
		owner's associat				4d.		0.00
5.	Additional n	nortgage payme	ents for yo	our residence, such as h	nome equity loans	5.	\$	2,084.84

Official Form 106J Schedule J: Your Expenses page 2

FIII IN this inform	ation to identify your	case:			
Debtor 1	James A. McCart	Middle Name	Last Name		
Debtor 2	i ii st i vaine	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	EASTERN DISTRICT	OF WASHINGTON		
Case number					
(if known)					☐ Check if this is an amended filing
Official Form	106Dec				
Declarati	on About a	an Individua	I Debtor's Sch	edules	12/15
•	U.S.C. §§ 152, 1341, 1 Below				
Did you pay	or agree to pay some	eone who is NOT an atte	orney to help you fill out ban	kruptcy forms?	
■ No					
☐ Yes. Na	ame of person				Petition Preparer's Notice, gnature (Official Form 119)
	y of perjury, I declare true and correct.	that I have read the su	mmary and schedules filed w	vith this declaration and	
X /s/ Jame	es A. McCarter		X		
	A. McCarter e of Debtor 1		Signature of De	ebtor 2	
Date 6	3/17/2022		Date		

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

Filli	in this inforr	nation to identify you	r case:			
Deb	tor 1	James A. McCar	ter			
Dob	tor 2	First Name	Middle Name	Last Name		
	tOf ∠ use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	WASHINGTON		
Cas	e number					
(if kno	_				-	check if this is an
					a	mended filing
<b>○</b> tt	::-:-! <b>-</b>	407				
	icial Fo	-	Affaina fan Indiesi	luala Filina fan B		
Sta	itement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/22
					equally responsible for sup additional pages, write you	
		n). Answer every que			y additional pages, write you	ii name ana case
Part	Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	_					
	<ul><li>■ Married</li><li>■ Not mai</li></ul>					
	- Not mai	meu				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	☐ Yes. Lis	st all of the places you I	ived in the last 3 years. Do no	ot include where you live now	1.	
	Debtor 1:		Dates Debtor 1	Debtor 2 Prior Ac	dress:	Dates Debtor 2
			lived there			lived there
					ity property state or territory	
siale	s and territor	ies include Anzona, Ca	iliomia, idano, Lodisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and W	risconsin.)
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explai	in the Sources of You	r Income			
_						
	•	•	nployment or from operatin u received from all jobs and a		ear or the two previous calest time activities.	ndar years?
	If you are filir	ng a joint case and you	have income that you receiv	e together, list it only once ur	nder Debtor 1.	
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
Ero:	m lanuaru4	of current year until	=	,	D Warran and the	and oxoldolono)
	•	of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$10,100.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

the date you filed for bankruptcy:	Repayment	<b>\$4,300.00</b>	
For last calendar year: (January 1 to December 31, 2021)	Business Loss	\$-3,926.00	

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

**Business Loss** 

- 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?
  - No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575\* or more?

■ No. Go to line 7.

For the calendar year before that:

(January 1 to December 31, 2020)

☐ Yes List below each creditor to whom you paid a total of \$7,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\$-11,566.00

- \* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.
- ☐ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

anomoy for the parmapity cade

Creditor's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	otor 1	James A. McCarter		Cas	se number (if knowr	o)	
7.	<i>Inside</i> of whi	n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 my.	ortners; relatives of any gen control, or owner of 20% of	neral partners; partners or more of their voting	erships of which y g securities; and	ou are a genera any managing ag	I partner; corporations gent, including one for
	_	No					
		Yes. List all payments to an insider.	D-1	T-(-1	A	D (	d. !
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
В.	inside	n 1 year before you filed for bankruptoer? le payments on debts guaranteed or cos		yments or transfer a	any property on	account of a de	ebt that benefited an
		No					
		Yes. List all payments to an insider					
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	this payment tor's name
Par	t 4:	Identify Legal Actions, Repossession	s, and Foreclosures				
	modifi	Il such matters, including personal injury ications, and contract disputes.  No Yes. Fill in the details.	cases, small claims action	ns, divorces, collectio	n suits, paternity	.,	·
		e title e number	Nature of the case	Court or agency		Status of the	e case
	Check	n 1 year before you filed for bankrupton all that apply and fill in the details below No. Go to line 11.  Yes. Fill in the information below.		erty repossessed, f	oreclosed, garn	ished, attached	, seized, or levied?
		litor Name and Address	Describe the Property		Date	9	Value of the
			Explain what happene	d			property
11.	accol	n 90 days before you filed for bankrup unts or refuse to make a payment bec No Yes. Fill in the details.	otcy, did any creditor, inc		nancial institutio	n, set off any a	mounts from your
	Cred					e action was	Amount
12.		n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a		erty in the possess	ion of an assign	ee for the bene	fit of creditors, a
		No					
		Yes					
Par	t 5:	List Certain Gifts and Contributions					
13.		n 2 years before you filed for bankrup	tcy, did you give any gift	s with a total value	of more than \$6	00 per person?	
	Gifts	Yes. Fill in the details for each gift.  with a total value of more than \$600 person	Describe the gifts	<b>:</b>		es you gave gifts	Value
	Pers Addr	on to Whom You Gave the Gift and ress:					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	tor 1 James A. McCarter	Ca	ase number (if known)	
14.	Within 2 years before you filed for bankrur	otcy, did you give any gifts or contributions	with a total value of more than	\$600 to any charity?
• • •	■ No	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , , , , , , , , , , , , , , , , , ,
	Yes. Fill in the details for each gift or cor	ntribution.		
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Part	6: List Certain Losses			
-	Within 1 year before you filed for bankrupt or gambling?	cy or since you filed for bankruptcy, did yo	ou lose anything because of thef	t, fire, other disaster,
	■ No			
	Yes. Fill in the details.			
	how the loss occurred	Describe any insurance coverage for the lost include the amount that insurance has paid. List insurance claims on line 33 of Schedule A/B: P	st pending loss	Value of property lost
Part	7: List Certain Payments or Transfers			
	consulted about seeking bankruptcy or princlude any attorneys, bankruptcy petition pre  No Yes. Fill in the details.  Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any proper transferred		Amount of payment
	Southwell & O'Rourke 421 W. Riverside Avenue Suite 960 Spokane, WA 99201	See 2016 Disclosure		
	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that you have a larger than your payment or transfer that you have a larger than your payment or transfer that you have a larger than your payment or transfer that you have a larger than your payment or transfer that you have a larger than y	cy, did you or anyone else acting on your kors or to make payments to your creditors ou listed on line 16.  Description and value of any proper transferred	?	rty to anyone who  Amount of payment
	transferred in the ordinary course of your	nade as security (such as the granting of a sec ady listed on this statement.		
	Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you Unrelated third party	On or about July, 2021, sold		7/2021
	omolated time party	boat for \$8,000. All sales proceeds used for living expenses.		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	Person Who Received Transfer Address Person's relationship to you	Description and v property transfer	value of red	Describe any propert payments received o paid in exchange		Date transfer was made		
	Traditional IRA	Debtor made \$6 traditional IRA of for 2021						
19.	Within 10 years before you filed for bankrubeneficiary? (These are often called asset-pr ■ No □ Yes. Fill in the details.		ny property to a s	elf-settled trust or simila	ar device of	which you are a		
	Name of trust	Description and v	alue of the prope	erty transferred		Date Transfer was made		
Par	Es: List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and Stor	rage Units				
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	Date account closed, sold, moved, or transferred	was	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents		Do you still have it?		
22.	Have you stored property in a storage unit	or place other than your	home within 1 y	ear before you filed for l	bankruptcy <sup>*</sup>	?		
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the contents		Do you still have it?		
Par	9: Identify Property You Hold or Control	for Someone Else						
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	ude any property	you borrowed from, are	storing for	r, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name	Where is the prop	perty?	Describe the property		Value		
	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, S Code)		Describe the property		value		

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 James A. McCarter Case number (if known)

Part 10: Give Details About Environmental Information

For	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, groundwa	•	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		v, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		aste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of when th	ney occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable ur	nder or in violation of an environm	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No			
	Yes. Fill in the details.			

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

Address (Number, Street, City, State and

Governmental unit

No Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code)

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code)

James A. McCarter DDS, P.S. 1432 W. Francis Avenue Spokane, WA 99205

Name of accountant or bookkeeper

**Dentist** 

Dates business existed

EIN:

From-To 2005-Present

Environmental law, if you

know it

Official Form 107

Name of site

Address (Number, Street, City, State and ZIP Code)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Date of notice

Debto	or 1 James A. McCarter	C	Case number (if known)
	nstitutions, creditors, or other parties.	tcy, did you give a financial statement to	anyone about your business? Include all financial
- I	Name Address Number, Street, City, State and ZIP Code)	Date Issued	
Part 1	2: Sign Below		
with a 18 U.S	bankruptcy case can result in fines up to 5.C. §§ 152, 1341, 1519, and 3571. https://doi.org/10.1003/ https://doi.org/10.	, 0, 1, 3,	obtaining money or property by fraud in connection ears, or both.
Signa	ature of Debtor 1		
Date	6/17/2022	Date	
Did yo ■ No □ Yes		ent of Financial Affairs for Individuals Fil	ing for Bankruptcy (Official Form 107)?
Did yo	ou pay or agree to pay someone who is no	ot an attorney to help you fill out bankrupt	tcy forms?
☐ Yes	s. Name of Person Attach the Bankr	uptcy Petition Preparer's Notice, Declaration	, and Signature (Official Form 119).

Official Form 107 Statem

Statement of Financial Affairs for Individuals Filing for Bankruptcy

FIII In this inforn	nation to identify your	case:		
Debtor 1	James A. McCarte	Middle Name	Last Name	
Debtor 2	Filst Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	EASTERN DISTR	ICT OF WASHINGTON	
		-		
Case number(if known)				☐ Check if this is an amended filing
	nt of Intentio		iduals Filing Under Chap	oter 7 12/15
	vidual filing under cha e claims secured by yo	•	out this form if:	
you have lease	ed personal property a s form with the court w ver is earlier, unless th	nd the lease has no rithin 30 days after	ot expired. you file your bankruptcy petition or by the dat e time for cause. You must also send copies t	
	ople are filing together date the form.	r in a joint case, bo	th are equally responsible for supplying corre	ct information. Both debtors must
write yo	our name and case nur	nber (if known).	needed, attach a separate sheet to this form.	On the top of any additional pages,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims		
		art 1 of Schedule D	: Creditors Who Have Claims Secured by Prop	perty (Official Form 106D), fill in the
information be Identify the cre	elow. editor and the property t	hat is collateral	What do you intend to do with the property secures a debt?	that Did you claim the property as exempt on Schedule C?
Creditor's C	hase		☐ Surrender the property.	□ No
name:			■ Retain the property and redeem it.	_
Description of	Debtor's Home 61	IOW Excell	Retain the property and enter into a	■ Yes
property securing debt:	Avenue Spokane, Spokane County		Reaffirmation Agreement.  ☐ Retain the property and [explain]:	
Creditor's M	lountain West Bank		☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description of	Cross collateralize	nd with	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:	Second Mortgage	19 W. Excell	Retain the property and [explain]:	
Creditor's M	lountain West Bank/	SDA	Commendanth a second	
name:	ioumain west bank/	SDA	<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	□ No
-			■ Retain the property and redeem it.  ☐ Retain the property and enter into a	■ Yes
			- Rotain the property and enter into a	

Statement of Intention for Individuals Filing Under Chapter 7

page 1

Official Form 108

Deb	tor 1	Jame	s A.	McCarter	Case number	er (if known)
р	roperty	tion of / g debt:	Ave	tor's Home 6119 W. Excell nue Spokane, WA 99208 kane County	Reaffirmation Agreement.  Retain the property and [explain]:	
				expired Personal Property Leases		Unexpired Leases (Official Form 106G), fill
n th	e info	rmation	belo	w. Do not list real estate leases. U	Inexpired leases are leases that are still in of the trustee does not assume it. 11 U.S.C.	effect; the lease period has not yet ended.
Des	cribe	your ur	expir	ed personal property leases		Will the lease be assumed?
Les	sor's n	ame:		CFF Investors, LLC		■ No
						☐ Yes
	cription perty:	n of leas	sed	property commonly known as 99205, pursuant to a Lease A	m CFF Investors, LLC, as Landlord, th s 1432 W. Francis, Spokane, Washingt greement dated October 27, 2014, for a ing estimated current lease payments	on a
Part	3:	Sign Be	low			
				ry, I declare that I have indicated r t to an unexpired lease.	ny intention about any property of my estat	te that secures a debt and any personal
X		ames A		Carter	X Signature of Debtor 2	
		ature of			Signature of Debiol 2	
	Date	_6/	17/20	)22	Date	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name as enumber (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consume debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-15upp) with this form.    What is your marital and filing status? Check one only.						
Debtor 2   Source at Birds)	Fill i	n this information to identify your case:			irected in this form and	in Form
United States Bankruptry Court for the: Eastern District of Washington    Case number	Deb	or 1 James A. McCarter	122	2A-1Supp:		
applies will be made under Chapter 7 Neans Test Calculation (Official Form 122A - 1    Chapter 7 Statement of Your Current Monthly Income				■ 1. There is no presi	umption of abuse	
Case unwher (If Novomi)    Calculation (Official Form 122A-2)	Unite	ed States Bankruptcy Court for the: Eastern District of \	Washington I		•	•
Check if this is an amended filing  Official Form 122A - 1  Chapter 7 Statement of Your Current Monthly Income  12/1  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name anse number (if known). If you believe that you are exempted from a presumption of abuse because you do not nave primarily consumer debts or because of qualifying military service, complete and tile Statement of Exemption from Presumption of Abuse Unider § 707(b)(2) (Official Form 122A-1Supp) with this form.  Part 1:    Calculate Your Current Monthly Income   Not married. Fill out Column A, lines 2-11.   Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11.   Married and your spouse is NOT filing with you. You and your spouse are:   Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.   Living separately or are legally separated. Fill out both Columns A and B, lines 2-11.   Married and your spouse is not filing with you. You and your spouse are:   Living apart for reasons that do not include evading the Means Test requirements. In U.S.C. § 707(b)(7)(7)(B).  Fill in the average monthly income that you received from all sources, derived during the 6 full months before you life this bankruptcy case. It U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 3.1. If the amount of your monthly income varied during the 6-months, and the income for all form this and divide the total by 6-fill in the result. Do not include a varied during the 6-months, and the income for all form this and wide the total by 6-fill in the result. Do not include a payment for any source which are regularly paid for household expenses of your oyour dependents, including	Case	e number				vicario 100t
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Net monthly income from rental or other real property \$ \$ \$		, ,	-\$			
<u> </u>			\$ Copy here ->	\$	\$	
, ,	7.	Interest, dividends, and royalties	<del></del>	\$	\$	

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

Chapter 7 Statement of Your Current Monthly Income

Signature of Debtor 1

MM / DD / YYYY

Date 6/17/2022

Official Form 122A-1

Debtor 1	James A. McCarter	Case number (if known)	

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill in this ir	nforma	ation to identify your case:			
Debtor 1	Ja	mes A. McCarter			
Debtor 2 (Spouse, if fi	ling)				
United State	s Bank	ruptcy Court for the: Eastern District of Washington			
Case numbe (if known)	er			☐ Check if this is an amended filing	
		n 122A - 1Supp of Exemption from Presumption of	f <b>A</b> b	use Under § 707(b)(2) 12	2/15
exempted from	om a p	nt together with Chapter 7 Statement of Your Current Monthleresumption of abuse. Be as complete and accurate as possilestatement applies to only one of you, the other person should C. § 707(b)(2)(C).	ble. If t	wo married people are filing together, and any of the	5
Part 1	dentif	y the Kind of Debts You Have			
persona	al, fam	ts primarily consumer debts? Consumer debts are defined in 1 ly, or household purpose." Make sure that your answer is consisting for Bankruptcy (Official Form 1).			for
■ No.		Form 122A-1; on the top of page 1 of that form, check box 1, <i>Th</i> lement with the signed Form 122A-1.	ere is i	no presumption of abuse, and sign Part 3. Then submit th	is
☐ Yes.	. Go to	Part 2.			
Part 2:	Detern	nine Whether Military Service Provisions Apply to You			
		abled veteran (as defined in 38 U.S.C. § 3741(1))?			
2. Ale you					
_		ou incur debts mostly while you were on active duty or while you	were p	erforming a homeland defense activity?	
		S.C. § 101(d)(1); 32 U.S.C. § 901(1).	·		
	No.	Go to line 3.			
	Yes.	Go to Form 122A-1: on the top of page 1 of that form, check box submit this supplement with the signed Form 122A-1.	x 1, <i>Th</i>	ere is no presumption of abuse, and sign Part 3. Then	
3. Are you	u or ha	eve you been a Reservist or member of the National Guard?			
□ No.	Cor	nplete Form 122A-1. Do not submit this supplement.			
☐ Yes.	. We	e you called to active duty or did you perform a homeland defens	se activ	ity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).	
	No.	Complete Form 122A-1. Do not submit this supplement.			
	Yes.	Check any one of the following categories that applies:			
		I was called to active duty after September 11, 2001, for at le 90 days and remain on active duty.	east	If you checked one of the categories to the left, go to Fo 122A-1. On the top of page 1 of Form 122A-1, check bo <i>The Means Test does not apply now</i> , and sign Part 3. The supplement with the signed Form 122A 1. You	x 3, hen
		I was called to active duty after September 11, 2001, for at legent and was released from active duty on which is fewer than 540 days before I file this bankruptcy case.	east ,	submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-during the exclusion period. The exclusion period means the time you are on active duty or are performing a	1
		I am performing a homeland defense activity for at least 90	days.	homeland defense activity, and for 540 days afterward. U.S.C. § 707(b)(2)(D)(ii).	11

Official Form 122A-1Supp

Statement of Exemption from Presumption of Abuse Under § 707(b)(2)

\_, which is fewer than 540 days before I

☐ I performed a homeland defense activity for at least 90 days,

page 1

If your exclusion period ends before your case is closed,

you may have to file an amended form later.

## United States Bankruptcy Court Eastern District of Washington

In re	e James A. McCarter	g.	Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COM	PENSATION OF ATTO	RNEY FOR DI	EBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplat	filing of the petition in bankruptcy	, or agreed to be paid	to me, for services r	
	For legal services, I have agreed to accept		\$	*	
	Prior to the filing of this statement I have received	ved	\$	*	
	Balance Due			*	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):	*\$6,662.75 received for pr		fees, costs, and	filing fee.
3.	The source of compensation to be paid to me is:	*\$385.00 per hour, plus co	sts.		
3.	_				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed c	ompensation with any other person	unless they are mem	bers and associates of	of my law firm.
	☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the				law firm. A
5.	In return for the above-disclosed fee, I have agreed	to render legal service for all aspec	ts of the bankruptcy	ease, including:	
	<ul><li>a. Analysis of the debtor's financial situation, and r</li><li>b. Preparation and filing of any petition, schedules,</li><li>c. Representation of the debtor at the meeting of cr</li><li>d. [Other provisions as needed]</li></ul>	statement of affairs and plan which	h may be required;	-	kruptcy;
6.	By agreement with the debtor(s), the above-disclose Set forth in Bankruptcy Fee Agreement		g service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of bankruptcy proceeding.	of any agreement or arrangement fo	r payment to me for r	epresentation of the	debtor(s) in
	6/17/2022	/s/ Kevin O'Rour	ke		
1	Date	Kevin O'Rourke			
		Signature of Attorn Southwell & O'R			
		421 W. Riverside	Avenue		
		Suite 960 Spokane, WA 99	201		
		509-624-0159 Fa			
		kevin@southwe			
		Name of law firm			

## **United States Bankruptcy Court** Eastern District of Washington

In re	James A. McCarter		Case No.			
		Debtor(s)	Chapter	7		
	VERIFICATION OF CREDITOR MATRIX					
he abo	ove-named Debtor hereby verifies	that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.		
Date:	6/17/2022	/s/ James A. McCarter James A. McCarter				

Signature of Debtor

JAMES A. MCCARTER 6119 W. EXCELL AVENUE SPOKANE, WA 99208

KEVIN O'ROURKE SOUTHWELL & O'ROURKE 421 W. RIVERSIDE AVENUE SUITE 960 SPOKANE, WA 99201

AESTHETIC MILLING SYSTEMS (AMS) 2425 W. HAYDEN AVENUE HAYDEN, ID 83835

BANNER BANK MC PO BOX 2181 WALLA WALLA, WA 99362-0181

BLACK COMMERCIAL, INC. A NAI BLACK COMPANY ATTN: JEFF K. JOHNSON, SIOR, CCIM 801 W. RIVERSIDE AVE., SUITE 300 SPOKANE, WA 99201

BURKHART DENTAL SUPPLY 2502 S. 78TH STREET TACOMA, WA 98409-9053

BURKHART EQUIPMENT FINANCE/ US BANK 1310 MADRID STREET, SUITE 101 MARSHALL, MN 56258

CFF INVESTORS, LLC ATTN: JEFF JOHNSON & JEFF MCKLOSKEY 801 W. RIVERSIDE AVE., SUITE 300 SPOKANE, WA 99201 CHASE
MAIL CODE LA4-6911
700 KANSAS LANE
MONROE, LA 71203-4774

CITI CARDS
PO BOX 78019
PHOENIX, AZ 85062-8019

CITIBANK/COSTCO ANYWHERE VISA 6716 GRADE LANE BUILDING 9, SUITE 9 LOUISVILLE, KY 40213

ERIC M. STEVEN STEVEN LAW OFFICE 1319 W. DEAN AVENUE SPOKANE, WA 99201

JAMES A. MCCARTER, DDS, P.S. 6119 W. EXCELL AVENUE SPOKANE, WA 99208

MOUNTAIN WEST BANK 125 IRONWOOD DRIVE COEUR D ALENE, ID 83814

MOUNTAIN WEST BANK 12321 E. MISSION AVENUE SPOKANE VALLEY, WA 99216

MOUNTAIN WEST BANK 101 IRONWOOD DRIVE, SUITE 252 COEUR D ALENE, ID 83816

MOUNTAIN WEST BANK 2123 N. GOVERNMENT WAY COEUR D ALENE, ID 83814 MOUNTAIN WEST BANK PO BOX 1059 COEUR D ALENE, ID 83816

MOUNTAIN WEST BANK/SBA 125 IRONWOOD DRIVE COEUR D ALENE, ID 83814

NAI BLACK 107 S. HOWARD, SUITE 500 SPOKANE, WA 99201

PATRICIA MCCARTER PO BOX 68 HAY SPRINGS, NE 69347

PATTORSON DENTAL SUPPLY, INC. 28244 NETWORK PLACE CHICAGO, IL 60673-1282

SMALL BUSINESS ADMINISTRATION 801 W. RIVERSIDE AVENUE SPOKANE, WA 99201

SPOKANE COUNTY TREASURER 1116 W. BROADWAY AVENUE SPOKANE, WA 99260

STATE OF WASHINGTON DEPARTMENT OF REVENUE PO BOX 47476 OLYMPIA, WA 98504-7464

US BANK
PO BOX 790408
SAINT LOUIS, MO 63179-0408

WELLS FARGO LOC SBL PO BOX 29482 PHOENIX, AZ 85038-8650